## Measles Immune Globulin (IG)

## **RECOMMENDATIONS:**

- The following patient groups are at risk for severe disease and complications from measles and should receive immune globulin (IG):
  - o Infants less than 12 months of age
  - o Pregnant women
  - Immunocompromised persons
- If administered within 6 days of exposure, IG can prevent or modify measles in a person that is not immune.
- IG can be given to other persons who do not have evidence of measles immunity, but priority should be given to persons exposed in settings with intense prolonged, close contact (e.g., household, childcare, classroom, etc.)
- IG is not indicated for persons 12 months and older who have received at least 1 dose of measles-containing vaccine, unless they are immunocompromised.



- IG administered intramuscularly (IGIM) is 0.5mL/kg of body weight (maximum dose = 15 mL)
- o IG administered intravenously (IVIG) is 400mg/kg.



Patient Group	Route	Comments
Persons without immunity	IM	Administer MMR vaccine 6 months after IGIM <u>or</u> 8 months after IGIV, provided the person is at least 12 months of age and the vaccine is not contraindicated.
Infants less than 12 months of age	IM	For infants 6 through 11 months of age, MMR can be given in place of IGIM, if administered within 72 hours of exposure.
Pregnant women without evidence of immunity	IV	IGIV is recommended to administer doses high enough to achieve estimated protective levels of measles antibody titers.
Severely immunocompromised*	IV	Administer IGIV prophylaxis regardless of the patients immunologic or vaccination status

<sup>\*</sup>Severely immunocompromised include patients with severe primary immunodeficiency; bone marrow transplant recipients until 12 months after completing all immunosuppressive therapy or longer for patients with graft vs. host disease; patients receiving treatment for ALL (Acute lymphocytic leukemia) with and until 6 months after treatment; patients diagnosed with AIDS or HIV with sever immunosuppression defined as CD4 percent less than 15% (all ages) or CD4 count less than 200 lymphocytes/mm³ (less than 5 years of age) and those who have not received MMR vaccine since receiving antiretroviral therapy (ART).



